

Message: Updated Invoice Template for June

✉ Updated Invoice Template for June**From**

Kraft, Emily

Date Wednesday, May 31, 2017 2:26 PM**To**

Megan Lengeran

Cc[NFN Invoice Template.xlsx](#) (16 Kb HTML)

Hi Megan,

I have attached a revised invoice template with the additional funding that you requested. I have plugged in the amount I have recorded for your previously invoiced total, so please review to ensure it matches your records, sign, and return.

Thanks,

Emily Kraft

*Alternatives to Abortion Program Manager
Truman Building, Room 430
Jefferson City, MO 65102
Phone: (573) 522-0003*

Invoice

A	B	C	D	E	F	G	H	I	J	K	L	M
1				E								
2				Alternatives								
3	Contract #	CS170042009		to Abortion								
4	Vendor Number:	43160132900/MB00094264		Invoice								
5												
6												
7	Bill To:	Office of Administration										
8		Commissioner's Office										
9		201 W. Capitol Ave, Room 125										
10		Jefferson City, MO 65101										
11												
12	Invoice Number:											
13	Invoice Date:											
14	Service Period:											
15												
16												
17	Total Contracted Allocation			Prior Invoiced Total			June Award Amount					
18												
19	\$ 135,565.40		\$ 108,155.02				\$ 27,410.38					
20	Quarterly expenditure						\$ -					
21	adjustment:											

22**23** Total Due: **\$ 27,410.38****24**

Allocation

\$ -

25 Remaining**26****27****28****29****30** Signature: _____**31****32****33****34****35**